



# Safety Simply Stated

## The Facts on Mold

by: Michael Alio, City Safety Officer

**H**eadlines about “toxic” mold have been frequent and inflammatory. Most experts agree there’s more fear than fact to “toxic” mold. Mold spreads easily, but fear of it may be spreading even faster. Buildings are being closed and torn down and insurance companies have been hit with claims from homeowners, which are being denied more and more.

There is definitely no definitive data that mold is harmful, including the famous black mold, *Stachybotrys chartarum*. It is important to note that there are many other types of black mold that occur in the environment. The Centers for Disease Control and Prevention (CDC) says there are very few case reports of mold causing internal bleeding or memory loss, and no link has been established. Most scientists say the only proven effects from mold are allergic reactions and possible respiratory

problems — including asthma. Some say mold fear is being whipped up by lawyers and mold cleanup companies eager to turn mold into gold. What most people do not understand is that mold is all around us!

Mold is usually present in our environment in the form of spores. These spores are naturally occurring and can be alive or dead. Some of these spores may elicit formation of antibodies when they enter the body and because of this can cause allergies and



diseases (e.g., asthma, severe allergies), infants less than 12 months old, persons having undergone recent surgery, and the elderly. The most common symptoms in healthy adults include runny nose, eye irritation, cough, and congestion.

How are mold complaints handled internally in City buildings?? First, outright testing of the air for mold is not always the best thing to do. All historic testing that has been completed in City buildings has shown that mold levels inside City buildings are lower than the mold being carried outside by the air currents. This is because an efficient and well-maintained heating, ventilation, and air

(Continued on page 2)

***“Some say mold fear is being whipped up by lawyers and mold cleanup companies eager to turn mold into gold”***

asthma. Scientists and doctors have long said that the group of individuals most susceptible to illnesses from mold exposure include those that are immune suppressed, have chronic inflammatory lung

### Inside this issue:

Facts on Mold	1
Getting Serious About Office Safety	2
Crystalline Silica Info.	3
Safety Tidbits	4
Ladder Safety	5
Fire Safety Quiz	8
Safety Training Calendar	9

### Special points of interest:

- *Facts about Mold*
- *Answers to last months safety Quiz*
- *Bulletin Board Update*
- *Office Safety Checklist*
- *Safety tidbits*
- *Monthly Safety Training Calendar*

## Mold Story Continued.....

conditioning system will trap mold spores within filters. This does not mean air sampling will never be done. The City Safety Office will



make a determination based on the types of complaints and a visual inspection of the area before air sampling is completed.

Cal/OSHA has promulgated a mold regulation that prohibits employers from having visible mold present in a facility. Remediation or clean-up of the visible mold is the obvious step when visible mold is present.

The amount of mold contamination will determine the type of remediation that must occur. In most cases where there is a small area of contamination, the mold can be cleaned and disinfected with a bleach and water solution. Heavily contaminated areas may require contaminated materials to be bagged and discarded instead of disinfected. In any case, anyone that is cleaning mold contamination must wear an N-95 mask!

The City Safety Office is committed to protect employees from the potential hazards of mold exposure. Visible mold should be immediately reported to this office so proper action may be taken.

### *Mold Prevention Tips:*

- \* Identifying condensation and wet spots
- \* Preventing condensation by increasing surface temperature, through insulation or increased air circulation, or by reducing humidity through repair of leaks and depending on the outside air—ventilating or dehumidifying
- \* Keeping HVAC drop pans clean, flowing properly, and unobstructed
- \* Performing regularly scheduled building/ HVAC inspections and maintenance, including filter changes
- \* Maintaining indoor relative humidity below 70% (25 to 60% if possible)
- \* Venting moisture-generating appliance, such as dryers, to the outside where possible
- \* Venting kitchens (cooking areas) and bathrooms according to local code requirements
- \* Providing adequate drainage around buildings and sloping the ground away from building foundations.

## Get Serious about Office Safety

The fact that far fewer people are hurt or killed in an office setting compared to many industries is no reason to consider office safety any less important. There are serious hazards lurking in most work environments. Here are some quick pointers to make your office environment safer.

- ✓ Make sure traffic areas are free of obstacles which can cause trip hazards (i.e. boxes of files, extension cords, or phone wires).
- ✓ Close doors of desk or file cabinets to ensure no one accidentally walks into them.
- ✓ Load File cabinets safely - fill from the bottom up. A filing cabinet that is top heavy can tip and crush an employee.
- ✓ Lift objects & loads correctly. Bend legs & not your back. Get help if necessary or use hand truck. Serious back injuries have occurred from incorrectly lifting furniture, printer paper, and even smaller items.
- ✓ Do not store paper & cardboard under stairwells or by electrical panels. Combustible materials like these are sources of office fires.
- ✓ Learn what to do in case of fire or emergency. Know at least 2 emergency exits.
- ✓ Know who is trained in first aid & the location of first aid supplies.
- ✓ Keep office furniture in good working order, broken chairs should be discarded/ thrown away.
- ✓ Arrange your work area for your comfort.

Also, to prevent office injuries you must inspect your area regularly for hazardous conditions!

# OSHA's Crystalline Silica Information

By: Jerry Wolfe, Department Safety Officer

Approximately two million U.S. workers are exposed to the dangerous and sometimes deadly effects of silica dust exposure. To help workers protect themselves against such exposure, OSHA has created *Crystalline Silica Exposure* health hazard information cards for both general industry and construction. The pocket-sized cards identify symptoms of silicosis and the most common causes of occupational exposure, as well as how to protect against exposure to the dust. Respirators and other personal protective equipment are also discussed. Below is the text of those cards. We will try to order and distribute them to those who are using sand blasting equipment, those who cut into concrete, and to those who mix concrete.

## "Crystalline Silica Exposure" Health Hazard Information

### ***What is crystalline silica?***

Crystalline silica is a basic component of soil, sand, granite, and many other minerals. Quartz is the most common form of crystalline silica. Cristobalite and tridymite are two other forms of crystalline silica. All three forms may become respirable size particles when workers chip, cut, drill, or grind objects that contain crystalline silica.

### ***What are the symptoms of silicosis?***

Silicosis is classified into three types: chronic/classic, accelerated, and acute.

**Chronic/classic silicosis**, the most common, occurs after 15–20 years of moderate to low exposures to respirable crystalline silica. Symptoms associated with chronic silicosis may or may not be obvious; therefore, workers need to have a chest x-ray to determine if there is lung damage. As the disease progresses, the worker may experience shortness of breath upon exercising and have clinical signs of poor oxygen/carbon dioxide exchange. In the later stages, the worker may experience fatigue, extreme shortness of breath, chest pain, or respiratory failure.

**Accelerated silicosis** can occur after 5–10 years of high exposures to respirable crystalline silica. Symptoms include severe shortness of breath, weakness, and weight loss. The onset of symptoms takes longer than in acute silicosis.

**Acute silicosis** occurs after a few months or as long as 2 years following exposures to extremely high concentrations of respirable crystalline silica. Symptoms of acute silicosis include severe disabling shortness of breath, weakness, and weight loss, which often leads to death.

### ***What are the hazards of crystalline silica?***

Silica exposure remains a serious threat to nearly 2 million U.S. workers, including more than 100,000 workers in high risk jobs such as abrasive blasting, foundry work, stonecutting, rock drilling, quarry work and tunneling. Crystalline silica has been classified as a human lung carcinogen. Additionally, breathing crystalline silica dust can cause **silicosis**, which in severe cases can be disabling, or even fatal. The respirable silica dust enters the lungs and causes the formation of scar tissue, thus reducing the lungs' ability to take in oxygen. There is no cure for silicosis. Since silicosis affects lung function, it makes one more susceptible to lung infections like **tuberculosis**. In addition, smoking causes lung damage and adds to the damage caused by breathing silica dust.

### ***How is OSHA addressing exposure to crystalline silica?***

OSHA has an established Permissible Exposure Limit, or PEL, which is the maximum amount of crystalline silica to which workers may be exposed during an 8-hr work shift (29 CFR 1926.55, 1910.1000). OSHA also requires hazard communication training for workers exposed to crystalline silica, and requires a respirator program until engineering controls are implemented. Additionally, OSHA has a National Emphasis Program (NEP) for Crystalline Silica exposure to identify, reduce, and eliminate health hazards associated with occupational exposures.

### ***What can employers/employees do to protect against exposures to crystalline silica?***

Replace crystalline silica materials with safer substitutes, whenever possible. Provide engineering or administrative controls, where feasible, such as local exhaust ventilation, and blasting cabinets. Where necessary to reduce exposures below the PEL, use protective equipment or other protective measures. Use all available work practices to control dust exposures, such as water sprays. Wear only a N95 NIOSH certified respirator, if respirator protection is required. Do not alter the respirator. Do not wear a tight-fitting respirator with a beard or mustache that prevents a good seal between the respirator and the face. Wear only a Type CE abrasive-blast supplied-air respirator for abrasive blasting. Wear disposable or washable work clothes and shower if facilities are available. Vacuum the dust from your clothes or change into clean clothing before leaving the work site. Participate in training, exposure monitoring, and health screening and surveillance programs to monitor any adverse health effects caused by crystalline silica exposures. Be aware of the operations and job tasks creating crystalline silica exposures in your workplace environment and know how to protect yourself. Smoking adds to the lung damage caused by silica exposures. Do not eat, drink, smoke, or apply cosmetics in areas where crystalline silica dust is present. Wash your hands and face outside of dusty areas before performing any of these activities. Remember: If it's silica, it's not just dust.

# ~ Safety Tidbits ~



To avoid hydroplaning, keep your tires properly inflated, maintain good tread on your tires and replace them when necessary. Try to drive in the tire tracks left by the cars in front of you, avoid puddles if you can and SLOW DOWN when roads are wet.

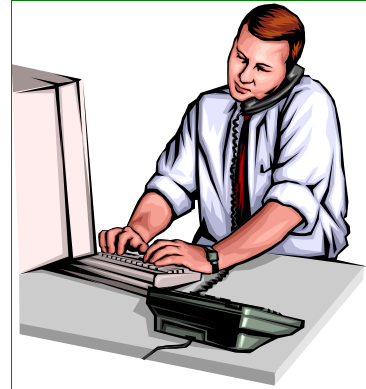


This year's World Health Organization's theme is **Road Safety**. The goal is to raise awareness about one of the leading causes of death and injury in the world. This overlooked public health threat takes 43,000 lives in the U.S. every year and 1.2 million lives globally.

What's the single most important thing you can do to protect yourself?

**Wear a seat belt!**

The drawing to the right is a great example of an "ergonomic" injury in the making. His head, neck, arms and wrists are all in an awkward position, which can cause cumulative trauma disorders. He should be looking straight ahead or slightly down at the monitor with elbows bent at 90 degrees, straight wrists, and should not be cradling the telephone.



Small children associate water with play, not with danger, so adults must establish and communicate responsibility for child safety. The following tips can help stop tragic and preventable drownings:



- \* During social gatherings, assign an adult "water watcher" to supervise the pool and spa area, or any other body of water.
- \* Never leave a child alone near a pool, spa, bathtub, toilet, water filled bucket, pond or any standing body of water in which a child's nose and mouth may be submersed.
- \* Don't rely on swimming lessons, inflatable "floaties" or other equipment to make a child water safe.
- \* Don't allow children to play in the pool or spa area.
- \* Look in the pool or spa first if a child is missing.
- \* Communicate pool safety measures with older children & baby-sitters. Make sure they are trained in CPR.

If you would like more information, the link below is to the Consumer Product Safety Commission's Pool and Spa Safety publications page. You'll find guidelines on barriers, alarms, pool and spa covers, proper supervision and lots more.

<http://www.cpsc.gov/cpscpub/pubs/chdrown.html>



# Ladder Safety

**R**ickety old & dirty ladders that are kept in service are accidents waiting to happen. Ladder safety is something that most of us take for granted, but the fact is that more than 30,000 people are injured each year by falls involving ladders. The fact is that many of these incidents can be prevented. There are five basic rules that should be followed when using a ladder. They are:

**RULE 1:** Select the right ladder for the job.

**RULE 2:** Inspect the ladder before you use it.

**RULE 3:** Set up the ladder with care.

**RULE 4:** Climb and descend ladders cautiously.

**RULE 5:** Use common sense when working on a ladder.

## Selecting the right ladder –

Specific jobs have specific tools that are needed to properly complete the task. The same is true with ladders. There are many types of ladders available and each one is intended for a specific purpose. Ladders can be manufactured from

wood, aluminum, or fiberglass, and be designed for light to industrial use. Regardless of the type or construction, be sure the ladder has a label certifying that it complies with specifications of the American National Standards Institute (ANSI) and is listed by Underwriters Laboratories (UL).

## Inspect the ladder before you use it –

Any ladder can develop a problem that can render it unsafe. Each time you use a ladder, inspect it for loose or damaged rungs, steps, rails, or braces. Also, check for loose screws, bolts, hinges and other hardware. Make certain the spreaders bars on stepladders can be locked in place and the ladder has safety feet, which will provide more stability and reduce the chances of the ladder slipping while you work. If the ladder has any type of defect, it must be repaired or the ladder must be



replaced. **NEVER USE A LADDER THAT IS DEFECTIVE!**

**Set up the ladder with care -** No matter how

safe the ladder is, if it is placed in a dangerous location or set up improperly an accident is bound to happen. If you must set up a ladder in a traffic area, use a barricade or guard to prevent collisions. The ladder should be set on a solid, level surface and the base should be kept uncluttered



## Climb & descend ladders

**cautiously -** Always face the ladder and hold on with both hands. If you need tools, carry them in a tool belt or raise and lower them with a hand line. To avoid slipping, always check the rungs and the bottoms of your shoes for slippery substances. As an option you may want to apply a slip-resistant material to the steps of a metal ladder to provide better footing.

Lastly, always use common sense when working on a ladder!

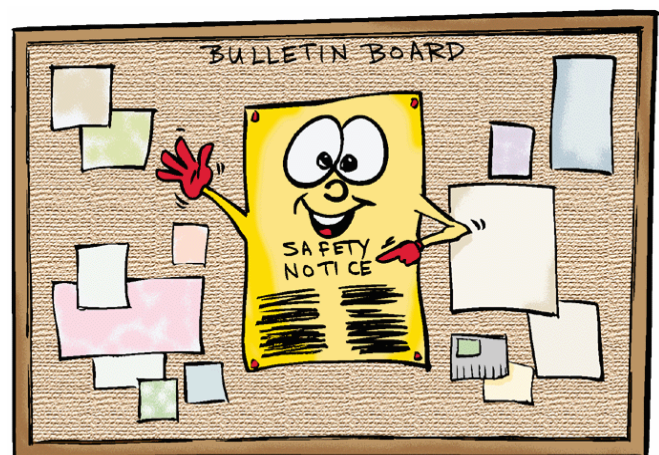
# Bulletin Board Update!

## Reminder:

The 2003 OSHA 300A form, which is a summary of your department's recordable injuries (listed on the OSHA 300 log), can be taken down this month.

According to OSHA regulations the 300A form posting requirements are from Feb 1st to April 30th.

So, remove that form and replace it with another piece of valuable safety information!



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## **Recommended Answers to Last Months Safety Quiz: In the Kitchen**

### **1. Refrigerators should stay at 40 F (5 C) or less, so B is the most correct answer.**

- If you didn't, you're not alone. According to Robert Buchanan, Ph.D., senior science adviser and director of science in the Food and Drug Administration's Center for Food Safety and Applied Nutrition, many people overlook the importance of maintaining an appropriate refrigerator temperature. "According to surveys, in many households, the refrigerator temperature is above 50 degrees (10 C)," he said. His advice: Measure the temperature with a thermometer and, if needed, adjust the refrigerator's temperature control dial. A temperature of 40 F (5 C) or less is important because it slows the growth of most bacteria. The temperature won't kill the bacteria, but it will keep them from multiplying, and the fewer there are, the less likely you are to get sick. Freezing at zero F (minus 18 C) or less stops bacterial growth (although it won't kill bacteria already present).

### **2. Answer B is the best practice.**

- Hot foods should be refrigerated as soon as possible within two hours after cooking. But don't keep the food if it's been standing out for more than two hours. Don't taste test it, either. Even a small amount of contaminated food can cause illness.
- Date leftovers so they can be used within a safe time. Generally, they remain safe when refrigerated for three to five days. If in doubt, throw it out, says FDA microbiologist Kelly Bunning, Ph.D., associate senior science adviser in CFSAN: "It's not worth a food borne illness for the small amount of food usually involved."

### **3. Answer A best describes the most correct answer.**

- According to John Guzewich, CFSAN's director of emergency coordination and response, the kitchen sink drain, disposal and connecting pipe are often overlooked, but they should be sanitized periodically by pouring down the sink a solution of 1 teaspoon (5 milliliters) of chlorine bleach in 1 quart (about 1 liter) of water or a solution of commercial kitchen cleaning agent made according to product directions. Food particles get trapped in the drain and disposal and, along with the moistness, create an ideal environment for bacterial growth.

### **4. Answer D describes the best household practice.**

- If you picked A, you're violating an important food safety rule: Never allow raw meat, poultry and fish to come in contact with other foods. Answer B isn't good, either. Improper washing, such as with a damp cloth, will not remove bacteria. And washing only with soap and water may not do the job, either.
- To prevent cross-contamination from a cutting board, the FDA advises consumers to follow these practices:
  - i. Use smooth cutting boards made of hard maple or a non-porous material such as plastic and free of cracks and crevices. These kinds of boards can be cleaned easily. Avoid boards made of soft, porous materials.
  - ii. Wash cutting boards with hot water, soap, and a scrub brush to remove food particles. Then sanitize the boards by putting them through the automatic dishwasher or rinsing them in a solution of 1 teaspoon (5 milliliters) of chlorine bleach in 1 quart (about 1 liter) of water.
  - iii. Always wash and sanitize cutting boards after using them for raw foods and before using them for ready-to-eat foods. Consider using one cutting board only for foods that will be cooked, such as raw fish, and another only for ready-to-eat foods, such as bread, fresh fruit, and cooked fish

### **5. Answers B & C.**

- Ground beef must be cooked to an internal temperature of 160 degrees Fahrenheit (71 degrees Celsius). Using a digital or dial food thermometer is crucial, the U.S. Department of Agriculture says, because research results indicate that some ground meat may prematurely brown before a safe internal temperature has been reached. On the other hand, research findings also show that some ground meat patties cooked to 160 F or above may remain pink inside for a number of reasons; thus the color of meat alone is not considered a reliable indicator of ground beef safety. If eating out, order your ground beef to be cooked well-done.

## Continued Recommended Answers.....

### 6. Answer D--eating the baked product would be the best choice.

- If you answered A or B, you may be putting yourself at risk for infection with *Salmonella Enteritidis*, a bacterium that can be inside shell eggs. Cooking the egg or egg-containing food product to an internal temperature of at least 160 F (71 C) kills the bacteria. Refrigerating will not kill the bacteria.

### 7. Answers C or D.

- According to FDA's Guzewich, bleach and commercial kitchen cleaning agents are the best sanitizers--provided they're diluted according to product directions. They're the most effective at getting rid of bacteria. Hot water and soap does a good job, too, but may not kill all strains of bacteria. Water alone may get rid of visible dirt, but not bacteria. Also, be sure to keep dishcloths clean because, when wet, they can harbor bacteria and may promote their growth.

### 8. Answers A and C.

- There are potential problems with B and D. When you let dishes sit in water for a long time, it "creates a soup," FDA's Buchanan says. "The food left on the dish contributes nutrients for bacteria, so the bacteria will multiply." When washing dishes by hand, he says, it's best to wash them all within two hours. Also, it's best to air-dry them so you don't handle them while they're wet.

### 9. The only correct practice is answer C.

- Wash hands with warm water and soap for at least 20 seconds before and after handling food, especially raw meat, poultry and fish. If you have an infection or cut on your hands, wear rubber or plastic gloves. Wash gloved hands just as often as bare hands because the gloves can pick up bacteria. (However, when washing gloved hands, you don't need to take off your gloves and wash your bare hands, too.)

### 10. Answers B or C are the best practice techniques.

- Food safety experts recommend thawing foods in the refrigerator or the microwave oven, or putting the package in a water-tight plastic bag submerged in cold water and changing the water every 30 minutes. Gradual defrosting overnight in the refrigerator is best because it helps maintain quality.
- Do not thaw meat, poultry and fish products on the counter or in the sink without cold water; bacteria can multiply rapidly at room temperature.

### 11. A and B are correct.

- When buying fresh seafood, buy only from reputable dealers who keep their products refrigerated or properly iced. Be wary, for example, of vendors selling fish out of their creel (canvas bag) or out of the back of their truck. Once you buy the seafood, immediately put it on ice, in the refrigerator, or in the freezer.

### 12. All of the answers are correct.

- People with certain diseases and conditions need to be especially careful because their diseases or the medicines they take may put them at risk for serious illness or death from contaminated seafood. These conditions include:
  - Liver disease, either from excessive alcohol use, viral hepatitis, or other causes
  - Hemochromatosis, an iron disorder
  - Diabetes
  - Stomach problems, including previous stomach surgery & low stomach acid (i.e. from antacid use)
  - Cancer and Immune disorders, including HIV infection
  - Long-term steroid use, as for asthma and arthritis.
- Older adults also may be at increased risk because they more often have these conditions. People with these diseases or conditions should never eat raw seafood--only seafood that has been thoroughly cooked.

# Fire Safety Quiz

# 1 - What is the most common cause of death in home fires?

- A. Burns
- B. Smoke Inhalation
- C. Exhaustion

# 2 - When do most home fires occur?

- A. Morning
- B. Lunchtime
- C. Evening/Night

# 3 - Where should you place smoke detectors?

- A. At least one on each floor
- B. Only in bedrooms
- C. Never in the kitchen because burning food sets them off

# 4 - How many accessible exits should you have out of each room in your house?

- A. One is enough
- B. Two or more

# 5 - How often should you practice Exit Drills In The Home?

- A. Once a week
- B. Once a month
- C. As often as possible

# 6 - If fire strikes your home, who should evacuate and head for the Safe Meeting Place?

- A. Children
- B. Everyone
- C. All except one adult who should go back into the house to search for valuables

# 7 - What should you do if you are trapped in a room that is higher than 2 stories?

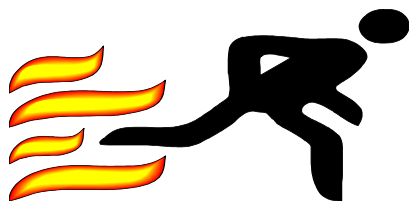
- A. Seal off the room to prevent smoke from entering and stay at the window
- B. Try to make a run for it
- C. Jump

# 8 - What should you do if your clothes catch on fire?

- A. Run as fast you can to the nearest source of water, such as a shower or garden hose.
- B. Beat the flames out with your hands, since you won't get burned if you move fast enough
- C. Stop, Drop and Roll

# 9 - What can persons of limited mobility, such as the elderly or handicapped, do to extinguish a fire on their clothes if they can not safely Stop, Drop and Roll?

- A. Smother the fire with a coat or heavy towel
- B. Run as fast as they can to the nearest source of water, such as a shower or garden hose.
- C. Get help from someone to push them on the ground so they can do "Stop, Drop & Roll".



**Answers to the Fire Safety Quiz will be posted in next months Newsletter.**



# May 2004

## Citywide Employee Safety Training Calendar

(Scheduled Classes as of April 26, 2004)



Date(s)	Course	Time(s)	Location
May 3 - 5	Hazwoper Waste Site Worker Non-Operational Initial (24 hrs)	7:30 am – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 4	Traffic Control Awareness 2-Sessions	Session 1: 7:00 am – 9:00 am & Session 2: 9:30 am – 11:30 am	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 4	Supervisors Incident Investigation Training (SCAT)	2:00 pm – 4:00 pm	Main Library 101 Pacific Ave. - lower level, Meeting Room 1
May 6	Trench and Excavation	7:30 am – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 10 - 12	Hazwoper Waste Site Worker Non-Operational Initial (24 hrs)	7:30 am – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 10 - 14	Hazwoper Waste Site Worker Operational Initial (40 hrs)	7:30 am – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 11	Bloodborne Pathogen (Module 3)	8:00 am – 10:00 am	LBE/EDC (Environmental Services Bureau) 2929 E. Willow St. Training Room <b>NOTE: Limited Parking or Please park on Willow St.</b>
May 12	Traffic Control Awareness 2-Sessions	Session 1: 7:00 am – 9:00 am & Session 2: 9:30 am – 11:30 am	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 13	Traffic Control Awareness	7:00 am – 9:00 am	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 13	AED/CPR (Module 1) 2-sessions AM/PM	AM Session: 8:00 am – 12:00 pm & PM Session: 12:30 pm – 4:30 pm	American Red Cross 3150 E. 29th St. - Classroom 2 <b>NOTE: Parking in the back of building</b>
May 13 - 14	Hazwoper Waste Site Worker Non Operational to Operational Upgrade (16 hrs)	7:30 am – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 17	Hazwoper First Responder Operational Initial	7:30 am – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 18	Trench and Excavation (4 hrs) 2-sessions AM/PM	AM Session: 7:30 am – 11:30 am & PM Session: 12:30 pm – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 19	Ergonomics Office Training	10:00 am – 11:30 am	Main Library 101 Pacific Ave. - lower level, Meeting Room 1
May 19	Skiploader & Backhoe Loader (8 hrs)	7:00 am – 3:30 pm	Water Department 1800 E. Wardlow Rd. – Admin. Assembly Rm
May 25	Hazwoper First Responder Operational Initial	7:30 am – 4:30 pm	Harbor Department, POLB 925 Harbor Plaza Dr. – 5 <sup>th</sup> floor Conference Rm
May 26	Bomb Threat Awareness (Partial module 4)	8:30 am – 10:00 am	TBD (Possibly WPSS)
May 26	Weapons of Mass Destruction (Module 6)	1:30 pm – 3:30 pm	LBE/EDC 2929 E. Willow St. - ESB Training Room
May 27	Walking Into Someone's Home (WISH) (8 hrs)	8:00 am – 5:00 pm	Health Department, 2525 Grand Ave. - Room 204



- **NOTE:** Course dates and time are subject to change without notice.
- Please be advised that HR will request a JV charge point from departments who have employees signed up for training and they do not show up for the class.
- If you have any questions, please contact May Jong, Risk Management @ [may\\_jong@longbeach.gov](mailto:may_jong@longbeach.gov)



If your interested in writing an article for our monthly Safety newsletter, please contact:

**The City Safety Office** extension 6552.

When submitting an article of safety interest, all we ask is that you provide your source of information so we can verify the information before we distribute and post it on the City Safety website.

We are always open to new ideas and we look forward to hearing from you.

—Thank you!

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# Mother's Day



**We're on the web!!**

<http://wmirror.cihttp://wmirror.ci.long-beach.ca.us:8000/hr/employees/safety/index>